Recertification Report - CARF Accredited Organization

Provider Name			Provider Number		Begin Cert Date	End Cert Date
GOODWILL INDUSTRIES OF WYOMING, INC.		1639303167		2/28/2010	2/28/2011	
Organizational Practices	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Provider Retrained on:	Health, Safety, or Rights Issue?	Date QIP Due
	Staff Training (Wyoming Medicaid rules Chapter 45, Section 26)	In-Compliance	2 of 2 staff files reviewed had documentation of Division required trainings including but not limited to, billing and documentation, complaint/grievance, and releases of information/confidentiality.		No	
	Staff Training (Wyoming Medicaid rules Chapter 45, Section 26)	In-Compliance	2 of 2 staff interviewed were able to articulate knowledge of what participant right restrictions are and when they apply.		No	
	Staff Training (Wyoming Medicaid rules Chapter 45, Section 26)	In-Compliance	2 of 2 staff files reviewed contained results of successful background screenings. 2 of 2 staff files reviewed contained current CPR/First-aid certification.		No	
	Emergency Drills (CARF 1.E.)	In-Compliance	Emergency drill documentation of locations was reviewed. All locations were running a variety of drills on all shifts, concerns noted and follow-up to those concerns documented as appropriate.		No	

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Emergency Procedures during Transportation (CARF 1.E.)	Not Reviewed	The provider's procedure was not reviewed as the provider reported no changes to the procedure in the past year. Further, there were no concerns noted during prior year's recertification.	No
Internal Inspections (CARF 1.E.)	In-Compliance	2 of 2 locations reviewed had documentation of internal inspections, with concerns identified when appropriate, and follow-up to concerns documented as appropriate.	No
Staff Qualifications (Wyoming Medicaid rules Chapter 45, Sections 8 through 22)	In-Compliance	2 of 2 staff files reviewed had documentation that staff met the current qualifications.	No
External Inspections (CARF 1.E.)	In-Compliance	2 of 2 locations reviewed had documentation of external inspections with follow-up to concerns documented as appropriate.	No
Progress made on prior DDD Survey recommendations	In-Compliance	With the exception of the issues addressed in this survey, the provider continues to make progress on recommendations from the previous survey.	No
Progress made on prior CARF Survey recommendations	In-Compliance	The provider continues to make progress on recommendations from the previous survey.	No
Incident reporting standards (Wyoming Medicaid rules Chapter 45, Section 30)	In-Compliance	The provider's policy was not reviewed as the provider reported no changes to the policy in the past year. Further, there were no concerns noted during prior year's recertification.	No

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In-Compliance	2 of 2 staff interviewed were able to articulate functional knowledge of the Division's Notification of Incident Reporting Process.	No
In-Compliance	The provider's policy was not reviewed as the provider reported no changes to the policy in the past year. Further, there were no concerns noted during prior year's recertification.	No
In-Compliance	The provider's policy was not reviewed as the provider reported no changes to the policy in the past year. Further, there were no concerns noted during prior year's recertification.	No
In-Compliance	not reviewed.	No
In-Compliance	The provider's policy was not reviewed as the provider reported no changes to the policy in the past year. Further, there were no concerns noted during prior year's recertification.	No
In-Compliance	The Providers medical assistance policy was reviewed with no concerns noted.	No
Not Reviewed	Provider reports that no new vehicles have been obtained in the past year. Vehicle inspected last year met applicable standards.	No
	In-Compliance In-Compliance In-Compliance In-Compliance	articulate functional knowledge of the Division's Notification of Incident Reporting Process. In-Compliance The provider's policy was not reviewed as the provider reported no changes to the policy in the past year. Further, there were no concerns noted during prior year's recertification. In-Compliance The provider's policy was not reviewed as the provider reported no changes to the policy in the past year. Further, there were no concerns noted during prior year's recertification. In-Compliance The provider's policy was not reviewed. In-Compliance The provider's policy was not reviewed as the provider reported no changes to the policy in the past year. Further, there were no concerns noted during prior year's recertification. In-Compliance The Provider's medical assistance policy was reviewed with no concerns noted. Not Reviewed Provider reports that no new vehicles have been obtained in the past year. Vehicle inspected last year met

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Participant Specific Reviews	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Provider Retrained on:	Health, Safety, or Rights Issue?	Date Due	QIP
	Releases of Information (CARF 2.B.)	In-Compliance	2 of 2 files reviewed had releases that were time-limited, specific to what information was being released, and to whom the information was being released.		No		
	Emergency Information (CARF 2.B.)	In-Compliance	2 of 2 participant files reviewed contained current and thorough emergency information.		No		
	Billing and Documentation (Wyoming Medicaid Rules Chtr. 45 Sect. 27)	In-Compliance	Three months of documentation was reviewed on 2 participants and met applicable standards. Billing is no longer part of the site survey process and thus was not reviewed.		No		
Case Management Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Provider Retrained on:	Health, Safety, or Rights Issue?	Date Due	QIP
	Case manager monthly/quarterly documentation meets requirements of Chapters 41, 42 and 43, and DD rule, Chapter 1	Suggestion	The case manager monthly/quarterly documentation for one participant was reviewed and is meeting documentation standards. It is suggested that case managers document time spent in direct contact with participants and/or guardians which may be beyond the required time needed for billing.		No		
	Team meeting notes (Chapters 41, 42, and 43 and DD rule, Chapter 1)	In-Compliance	One participant file was reviewed and contained team meeting notes that met applicable standards.		No		

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	Other rule or standard, case managers of organization have indivdualized policues.	In-Compliance	Each case manager has individual policy and procedures for medical assistnce.		No	
Day Habilitiation, Employment Services	Area of Survey	Findings & Identification of Noncompliance	As Evidenced By	Provider Retrained on:	Health, Safety, or Rights Issue?	Date QIP Due
	The organization meets the standards for Community Integration (CARF 4.E)	In-Compliance	Provider meets current standards for community integration.		No	
	The organization meets the standards for employment (CARF Section 3 and Chapter 45 Section 23)	In-Compliance	Provider meets current standards for employment services.		No	
	Organization maintains a healthy and safe environment – all service settings (CARF 1.E.10 Chapter 45, Section 23)	Recommendation (Focused)	Provider maintains a safe and healthy environment except as noted below. One location had floor tile that was coming loose and discolored in one of the restrooms.		Yes	2/26/2010
	Organization meets the standards for the service provided (CARF Standards and Medicaid rules)	In-Compliance	Provider meets standards for services provided.		No	

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